

Richard K. Abdalah, Esq. (SBN 60380)  
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Attorney for Creditor Julie Cliff

IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE NORTHERN DISTRICT OF CALIFORNIA

In re:	)	CASE NO. 22-50907 MEH
	)	
VINH DUC NGUYEN, aka	)	<b>DECLARATION OF</b>
VINCE NGUYEN,	)	<b>RICHARD K. ABDALAH IN</b>
	)	<b>SUPPORT OF OPPOSITION</b>
	)	<b>TO MOTION FOR</b>
Debtor.	)	<b>AUTHORITY TO ENTER</b>
_____	)	<b>INTO AGREEMENT</b>
		<b>CONCERNING INTEREST</b>
		<b>IN REAL PROPERTY</b>
		<b>SUBJECT TO OVERBID,</b>
		<b>AND FOR APPROVAL OF</b>
		<b>DEBTOR'S SETTLEMENT</b>
		<b>AND GLOBAL RELEASE</b>
		<b>WITH PAUL NGUYEN;</b>
		<b>REQUEST FOR HEARING</b>

I, Richard K. Abdalah, declare:

Except for those matters stated on information and belief, which I believe to be true, I have personal knowledge of the facts stated herein and, if called as a witness, I could and would competently testify thereto.

1. I am the attorney of record for Creditor Julie Cliff in the above entitled action.
2. Empire Investments, LLC, is a limited liability company organized and existing under the laws of the State of Wyoming, and registered to do business in the State of California. Empire Investments, LLC, is a shell limited liability company under the sole control of Vinh Nguyen and his wife, Teri Nguyen, and it has no other business dealings other than the purported ownership of the subject residential real property. Justin Nguyen, the purported manager of Empire Investments, LLC, is Debtor's son. The address and telephone number provided for Justin Nguyen is actually the address and personal cellular telephone number of Debtor. (Doc. No. 29, at 53; Doc. No. 42-3, at 3.)<sup>1</sup>
3. The subject residential property was originally owned by Vinh D. Nguyen and Teri H. Nguyen, Trustees of the Nguyen-Ha Living Trust, dated December 10, 2004. The property of the trust was under the sole control of Vinh Nguyen and Teri Nguyen.

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<sup>1</sup> We must add that Debtor has provided the court with an incorrect home address. Debtor does not reside at 15520 Quito Road, Saratoga, California. (Doc. No. 1.) He actually resides at 1255 Blewett Avenue, San Jose, California. (Ex. D to Decl. of R. Abdalah.)

Case: 22-50907 Doc# 160-1 Filed: 02/03/23 Entered: 02/03/23 16:52:36 Page 3  
of 17

s/Richard K. Abdalah  
Richard K. Abdalah, Esq.

Exhibit A

LLC-5

# Application to Register a Foreign Limited Liability Company (LLC)

To register in California an LLC from another state, country or other place, fill out this form, and submit for filing along with:

- ✓ A \$70 filing fee, and
- ✓ A certificate of good standing, issued within the last six (6) months by the agency where the LLC was formed.
- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form.

**Important!** LLCs in California may have to pay a minimum \$800 yearly tax to the California Franchise Tax Board. For more information, go to <https://www.ftb.ca.gov>.

Registered LLCs cannot provide in California "professional services," as defined by California Corporations Code sections 13401(a) and 13401.3.

**FILED**  
**Secretary of State**  
**State of California**  
**OCT 19 2015**

1 PC This Space For Office Use Only

For questions about this form, go to [www.sos.ca.gov/business/be/filing-tips.htm](http://www.sos.ca.gov/business/be/filing-tips.htm)

## LLC Name to be used for this LLC in California

- ① a. EMPIRE INVESTMENTS, LLC  
 LLC Name List the LLC name you use now (exactly as listed on your certificate of good standing)
- b. EMPIRE INVESTMENTS TEAM, LLC  
 Alternate Name If the LLC name in Item 1a does not comply with California Corporations Code section 17701.08; list an alternate name to be used in California exactly as it is to appear on the records of the California Secretary of State. The alternate name **must** include: LLC, L.L.C., Limited Liability Company, Limited Liability Co., Ltd. Liability Co. or Ltd. Liability Company; and **may not** include: bank, trust, trustee, incorporated, inc., corporation, or corp., insurer, or insurance company. For general entity name requirements and restrictions, go to [www.sos.ca.gov/business/be/name-availability.htm](http://www.sos.ca.gov/business/be/name-availability.htm).

## LLC History

- ② a. Date your LLC was formed (MM, DD, YYYY): 05/23/11
- b. State, country or other place where your LLC was formed: Wyoming
- c. Your LLC currently has powers and privileges to conduct business in the state, country or other place listed above.

**Service of Process** (List a California resident or a California registered corporate agent that agrees to be your initial agent to accept service of process in case your LLC is sued. You may list any adult who lives in California. You may **not** list an LLC as the agent. Do not list an address if the agent is a California registered corporate agent as the agent's address for service of process is already on file.)

- ③ a. VINH NGUYEN  
 Agent's Name
- b. 1361 S. Winchester Blvd. Ste 111 San Jose CA 95128  
 Agent's Street Address (if agent is not a corporation) - Do not list a P.O. Box City (no abbreviations) State Zip

If the agent listed above has resigned or cannot be found or served after reasonable attempts, the California Secretary of State will be appointed the agent for service of process for your LLC.

## LLC Addresses

- ④ a. 12329 Kosich Place, Saratoga CA 95070  
 Street Address of Principal Executive Office - Do not list a P.O. Box City (no abbreviations) State Zip
- b. 12329 Kosich Place, Saratoga CA 95070  
 Street Address of Principal Office in California, if any - Do not list a P.O. Box City (no abbreviations) State Zip
- c. \_\_\_\_\_  
 Mailing Address of Principal Executive Office, if different from 4a or 4b City (no abbreviations) State Zip

## Read and sign below:

I am authorized to sign this document under the laws of the state, country or other place where this LLC was formed.

Sign here Justin V. Nguyen Justin V. NGUYEN Member  
 Print your name here Your business title

Make check/money order payable to: **Secretary of State**.  
 Upon filing, we will return one (1) uncertified copy of your filed document for free, and will certify the copy upon request and payment of a \$5 certification fee.

**By Mail**  
 Secretary of State  
 Business Entities, P.O. Box 944228  
 Sacramento, CA 94244-2280

**Drop-Off**  
 Secretary of State  
 1500 11th Street, 3rd Floor  
 Sacramento, CA 95814

Exhibit B



**Secretary of State**  
**Statement of Information**  
(Limited Liability Company)

LLC-12

**FILED**

In the office of the Secretary of State  
of the State of California

MAY 23, 2018

**IMPORTANT** — [Read instructions](#) before completing this form.

**Filing Fee – \$20.00**

**Copy Fees** – First page \$1.00; each attachment page \$0.50;  
Certification Fee - \$5.00 plus copy fees

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**1. Limited Liability Company Name** (Enter the exact name of the LLC. If you registered in California using an alternate name, [see instructions](#).)

EMPIRE INVESTMENTS TEAM, LLC

**2. 12-Digit Secretary of State File Number**  
201529410414

**3. State, Foreign Country or Place of Organization** (only if formed outside of California)  
WYOMING

**4. Business Addresses**

a. Street Address of Principal Office - Do not list a P.O. Box  
1302 Lincoln Ave., Suite 204

City (no abbreviations)  
San Jose

State Zip Code  
CA 95125

b. Mailing Address of LLC, if different than item 4a  
1302 Lincoln Ave., Suite 204

City (no abbreviations)  
San Jose

State Zip Code  
CA 95125

c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box  
1302 Lincoln Ave., Suite 204

City (no abbreviations)  
San Jose

State Zip Code  
CA 95125

**5. Manager(s) or Member(s)**

If no **managers** have been appointed or elected, provide the name and address of each **member**. At least one name **and** address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an entity, complete Items 5b and 5c (leave Item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and addresses on Form LLC-12A ([see instructions](#)).

a. First Name, if an individual - Do not complete Item 5b  
Justin

Middle Name  
Vu

Last Name  
Nguyen

Suffix

b. Entity Name - Do not complete Item 5a

c. Address  
1302 Lincoln Ave., Suite 204

City (no abbreviations)  
San Jose

State Zip Code  
CA 95125

**6. Service of Process** (Must provide either Individual **OR** Corporation.)

**INDIVIDUAL** – Complete Items 6a and 6b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is **not** a corporation)  
Vince

Middle Name

Last Name  
Nguyen

Suffix

b. Street Address (if agent is **not** a corporation) - **Do not enter a P.O. Box**  
1302 Lincoln Ave., Suite 204

City (no abbreviations)  
San Jose

State Zip Code  
CA 95125

**CORPORATION** – Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 6a or 6b

**7. Type of Business**

a. Describe the type of business or services of the Limited Liability Company  
INVESTMENT IN REAL ESTATE

**8. Chief Executive Officer, if elected or appointed**

a. First Name

Middle Name

Last Name

Suffix

b. Address

City (no abbreviations)

State Zip Code

**9. The information contained herein, including any attachments, is true and correct.**

05/23/2018

Vince Nguyen

ATTORNEY

Date

Type or Print Name of Person Completing the Form

Title

Signature

**Return Address (Optional)** (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address. This information will become public when filed. [SEE INSTRUCTIONS BEFORE COMPLETING.](#))

Name: [ ]

Company:

Address:

City/State/Zip: [ ]





Secretary of State  
Statement of Information  
(Limited Liability Company)

LLC-12

FILED

In the office of the Secretary of State  
of the State of California

NOV 07, 2021

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IMPORTANT — [Read instructions](#) before completing this form.

Filing Fee – \$20.00

Copy Fees – First page \$1.00; each attachment page \$0.50;  
Certification Fee – \$5.00 plus copy fees

1. Limited Liability Company Name (Enter the exact name of the LLC. If you registered in California using an alternate name, [see instructions](#).)

EMPIRE INVESTMENTS TEAM, LLC

2. 12-Digit Secretary of State File Number  
201529410414

3. State, Foreign Country or Place of Organization (only if formed outside of California)  
WYOMING

4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box 1314 Lincoln Ave, Ste 2E	City (no abbreviations) San Jose	State CA	Zip Code 95125
b. Mailing Address of LLC, if different than item 4a 1314 Lincoln Ave, Ste 2E	City (no abbreviations) San Jose	State CA	Zip Code 95125
c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box 1314 Lincoln Ave, Ste 2E	City (no abbreviations) San Jose	State CA	Zip Code 95125

5. Manager(s) or Member(s)

If no **managers** have been appointed or elected, provide the name and address of each **member**. At least one name **and** address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an entity, complete Items 5b and 5c (leave Item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and addresses on Form LLC-12A ([see instructions](#)).

a. First Name, if an individual - Do not complete Item 5b Justin	Middle Name Vu	Last Name Nguyen	Suffix
b. Entity Name - Do not complete Item 5a			
c. Address 1314 Lincoln Ave, Ste 2E	City (no abbreviations) San Jose	State CA	Zip Code 95125

6. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL – Complete Items 6a and 6b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is <b>not</b> a corporation) VINH	Middle Name DUC	Last Name NGUYEN	Suffix
b. Street Address (if agent is <b>not</b> a corporation) - <b>Do not enter a P.O. Box</b> 1314 Lincoln Ave, Ste 2E	City (no abbreviations) San Jose	State CA	Zip Code 95125

CORPORATION – Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 6a or 6b

7. Type of Business

a. Describe the type of business or services of the Limited Liability Company  
real estate leasing

8. Chief Executive Officer, if elected or appointed

a. First Name	Middle Name	Last Name	Suffix
b. Address			
City (no abbreviations)		State	Zip Code

9. The information contained herein, including any attachments, is true and correct.

11/07/2021

VINH DUC NGUYEN

Attorney

Date

Type or Print Name of Person Completing the Form

Title

Signature

Return Address (Optional) (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address. This information will become public when filed. [SEE INSTRUCTIONS BEFORE COMPLETING](#).)

Name: [ ]

Company:

Address:

City/State/Zip: [ ]

Exhibit C

201229010128

<b>LLC-5</b>	<b>Application to Register a Foreign Limited Liability Company (LLC)</b>
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To register an LLC from another state or country in California, fill out this form, and submit for filing along with:

- A \$70 filing fee,
- A certificate of good standing from the agency where your LLC was formed originally, and
- A separate, non-refundable \$15 service fee, if you drop off the completed form.

**Important!** LLCs in California may have to pay a minimum \$800 yearly tax to the Franchise Tax Board.

LLCs that provide *professional* services cannot register in California.

**FILED**  
in the office of the Secretary of State  
of the State of California

**OCT 10 2012**

*[Signature]*

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For questions about this form, go to [www.sos.ca.gov/business/be/filing-tips.htm](http://www.sos.ca.gov/business/be/filing-tips.htm)

① **Name to be used for this LLC in California**

CATINA INVESTMENT, LLC  
proposed LLC name

The name must end with: "LLC," "L.L.C.," "Limited Liability Company," "Limited Liability Co.," "Ltd. Liability Co." or "Ltd. Liability Company;" and may not include: "bank," "trust," "trustee," "incorporated," "inc.," "corporation," or "corp.," "insurer," or "insurance company."

② **LLC History**

a. If the proposed LLC name you listed above is different than the LLC name you use now (as listed on your certificate of good standing), list the complete LLC name used now:  
N/A

b. Date your LLC was formed (MM, DD, YYYY): April 4, 2012

c. State or country where your LLC was formed: Nevada

d. Your LLC currently has powers and privileges to conduct business in the state or country listed above.

③ **Service of Process**

List a California resident or a qualified 1505 corporation in California that agrees to be your agent to accept service of process in case your LLC is sued. You may list any adult who lives in California. You may not list an LLC as your agent. Do not list an address if the agent is a 1505 corporation.

a. Agent's name: Vince Nguyen, Esq.

b. Agent's address: 1361 S. Winchester Blvd., Suite 111 San Jose CA 95128  
street address (if agent is not a corporation) city (no abbreviations) state zip

If the agent listed above has resigned or cannot be found or served after reasonable attempts, the California Secretary of State will be appointed the agent for service of process for your LLC.

④ **LLC Address**

a. List address for your LLC's headquarters:  
1000 E. William St., Suite 204 Carson City NV 89701  
street address city (no abbreviations) state zip

b. List address for your LLC's main office in California, if any:  
1321 S. Winchester Blvd., Suite 245 San Jose CA 95128  
street address city (no abbreviations) state zip

⑤ **Read and sign below:**

I declare that I am the person who signed this form, and that I am authorized to do so under the laws of the state or country where this LLC was formed.

*[Signature]* 10/09/12  
Sign here Date

VINCE NGUYEN Manager  
Print your name here Your business title

<b>Make check/money order payable to: Secretary of State</b> We can give you up to 2 free certified copies of your filed form if you submit up to 2 completed copies of this form (with all attachments).	<b>By Mail</b> Secretary of State Business Entities, P.O. Box 944228 Sacramento, CA 94244-2280	<b>Drop-Off</b> Secretary of State 1500 11th St., 3rd Floor Sacramento, CA 95814
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Corporations Code §§ 17375, 17451, 17452, Revenue and Taxation Code § 17941  
LLC-5 (REV 09/2010)

2010 California Secretary of State  
[www.sos.ca.gov/business](http://www.sos.ca.gov/business)





**Secretary of State**  
**Statement of Information**  
(Limited Liability Company)

LLC-12

21-E52265

**FILED**

In the office of the Secretary of State  
of the State of California

SEP 01, 2021

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**IMPORTANT** — [Read instructions](#) before completing this form.

**Filing Fee – \$20.00**

**Copy Fees** – First page \$1.00; each attachment page \$0.50;  
Certification Fee – \$5.00 plus copy fees

**1. Limited Liability Company Name** (Enter the exact name of the LLC. If you registered in California using an alternate name, [see instructions](#).)

CATINA INVESTMENT, LLC

**2. 12-Digit Secretary of State File Number**

201229010128

**3. State, Foreign Country or Place of Organization** (only if formed outside of California)

NEVADA

**4. Business Addresses**

a. Street Address of Principal Office - Do not list a P.O. Box

1302 LINCOLN AVE, STE 204

City (no abbreviations)

SAN JOSE

State

CA

Zip Code

95125

b. Mailing Address of LLC, if different than item 4a

1302 LINCOLN AVE, STE 204

City (no abbreviations)

SAN JOSE

State

CA

Zip Code

95125

c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box

City (no abbreviations)

State

CA

Zip Code

**5. Manager(s) or Member(s)**

If no **managers** have been appointed or elected, provide the name and address of each **member**. At least one name **and** address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an entity, complete Items 5b and 5c (leave Item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and addresses on Form LLC-12A ([see instructions](#)).

a. First Name, if an individual - Do not complete Item 5b

Justin

Middle Name

Vu

Last Name

Nguyen

Suffix

b. Entity Name - Do not complete Item 5a

c. Address

1302 Lincoln Ave Suite 204

City (no abbreviations)

San Jose

State

CA

Zip Code

95125

**6. Service of Process** (Must provide either Individual **OR** Corporation.)

**INDIVIDUAL** – Complete Items 6a and 6b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is **not** a corporation)

VINH

Middle Name

DUC

Last Name

NGUYEN

Suffix

b. Street Address (if agent is **not** a corporation) - **Do not enter a P.O. Box**

1302 LINCOLN AVE, STE 204

City (no abbreviations)

SAN JOSE

State

CA

Zip Code

95125

**CORPORATION** – Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 6a or 6b

**7. Type of Business**

a. Describe the type of business or services of the Limited Liability Company

INVESTMENT IN REAL ESTATE

**8. Chief Executive Officer, if elected or appointed**

a. First Name

Middle Name

Last Name

Suffix

b. Address

City (no abbreviations)

State

Zip Code

**9. The information contained herein, including any attachments, is true and correct.**

09/01/2021

VINH DUC NGUYEN

Attorney

Date

Type or Print Name of Person Completing the Form

Title

Signature

**Return Address (Optional)** (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address. This information will become public when filed. [SEE INSTRUCTIONS BEFORE COMPLETING.](#))

Name:

Company:

Address:

City/State/Zip:



**Secretary of State**  
**Statement of Information**  
(Limited Liability Company)

LLC-12

**FILED**

In the office of the Secretary of State  
of the State of California

SEP 12, 2021

**IMPORTANT** — [Read instructions](#) before completing this form.

**Filing Fee** — \$20.00

**Copy Fees** — First page \$1.00; each attachment page \$0.50;  
Certification Fee - \$5.00 plus copy fees

**This Space For Office Use Only**

**1. Limited Liability Company Name** (Enter the exact name of the LLC. If you registered in California using an alternate name, [see instructions](#).)

CATINA INVESTMENT, LLC

**2. 12-Digit Secretary of State File Number**

201229010128

**3. State, Foreign Country or Place of Organization** (only if formed outside of California)

NEVADA

**4. Business Addresses**

a. Street Address of Principal Office - Do not list a P.O. Box 1314 LINCOLN AVE. STE 2E	City (no abbreviations) SAN JOSE	State CA	Zip Code 95125
b. Mailing Address of LLC, if different than item 4a 1314 LINCOLN AVE. STE 2E	City (no abbreviations) SAN JOSE	State CA	Zip Code 95125
c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box 1314 LINCOLN AVE. STE 2E	City (no abbreviations) SAN JOSE	State CA	Zip Code 95125

**5. Manager(s) or Member(s)**

If no **managers** have been appointed or elected, provide the name and address of each **member**. At least one name **and** address must be listed. If the manager/member is an individual, complete Items 5a and 5c (leave Item 5b blank). If the manager/member is an entity, complete Items 5b and 5c (leave Item 5a blank). Note: The LLC cannot serve as its own manager or member. If the LLC has additional managers/members, enter the name(s) and addresses on Form LLC-12A ([see instructions](#)).

a. First Name, if an individual - Do not complete Item 5b JUSTIN	Middle Name	Last Name NGUYEN	Suffix
b. Entity Name - Do not complete Item 5a			
c. Address 1314 LINCOLN AVE. STE 2E	City (no abbreviations) SAN JOSE	State CA	Zip Code 95125

**6. Service of Process** (Must provide either Individual **OR** Corporation.)

**INDIVIDUAL** — Complete Items 6a and 6b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is <b>not</b> a corporation) VINH	Middle Name	Last Name NGUYEN	Suffix
b. Street Address (if agent is <b>not</b> a corporation) - <b>Do not enter a P.O. Box</b> 1314 LINCOLN AVE. STE 2E	City (no abbreviations) SAN JOSE	State CA	Zip Code 95125

**CORPORATION** — Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) — Do not complete Item 6a or 6b
---

**7. Type of Business**

a. Describe the type of business or services of the Limited Liability Company INVESTMENT IN REAL ESTATE
--

**8. Chief Executive Officer, if elected or appointed**

a. First Name	Middle Name	Last Name	Suffix
b. Address	City (no abbreviations)	State	Zip Code

**9. The information contained herein, including any attachments, is true and correct.**

09/12/2021

VINH NGUYEN

ATTORNEY

Date

Type or Print Name of Person Completing the Form

Title

Signature

**Return Address (Optional)** (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address. This information will become public when filed. [SEE INSTRUCTIONS BEFORE COMPLETING.](#))

Name: [ ]

Company:

Address:

City/State/Zip: [ ]

Exhibit D



1. At the time of service I was at least 18 years of age and not a party to this action.

2. I served copies of:

- a. ☒ summons
- b. ☒ complaint
- c. ☒ Alternative Dispute Resolution (ADR) package
- d. ☒ Civil Case Cover Sheet (served in complex cases only)
- e. ☐ cross-complaint
- f. ☒ other (specify documents): CIVIL LAWSUIT NOTICE

3. a. Party served (specify name of party as shown on documents served):  
VINCE NGUYEN aka VINH DUC NGUYEN

b. ☐ Person (other than the party in item 3a) served on behalf of an entity or as an authorized agent (and not a person under item 5b on whom substituted service was made) (specify name and relationship to the party named in item 3a):

4. Address where the party was served:  
1255 BLEWETT AVE. SAN JOSE, CA 95125

5. I served the party (check proper box)

a. ☐ **by personal service.** I personally delivered the documents listed in item 2 to the party or person authorized to receive service of process for the party (1) on (date): (2) at (time):

b. ☒ **by substituted service.** on (date): 5-11-2022 at (time): 10:07 AM I left the documents listed in item 2 with or in the presence of (name and title or relationship to person indicated in item 3):  
FEMALE, TERI HA NGUYEN, SUBJECTS WIFE, ID FROM PHOTO I RECIEVED

(1) ☐ **(business)** a person at least 18 years of age apparently in charge at the office or usual place of business of the person to be served. I informed him or her of the general nature of the papers.

(2) ☒ **(home)** a competent member of the household (at least 18 years of age) at the dwelling house or usual place of abode of the party. I informed him or her of the general nature of the papers.

(3) ☐ **(physical address unknown)** a person at least 18 years of age apparently in charge at the usual mailing address of the person to be served, other than a United States Postal Service post office box. I informed him or her of the general nature of the papers.

(4) ☒ I thereafter mailed (by first-class, postage prepaid) copies of the documents to the person to be served at the place where the copies were left (Code Civ. Proc., § 415.20). I mailed the documents on (date): 5-13-2022 from (city): SAN JOSE, CA 95155 or ☐ a declaration of mailing is attached.

(5) ☒ I attach a **declaration of diligence** stating actions taken first to attempt personal service.

PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	CASE NUMBER:
--	--------------

5. c. ☐ **by mail and acknowledgment of receipt of service.** I mailed the documents listed in item 2 to the party, to the address shown in item 4, by first-class mail, postage prepaid,
- (1) on (date): (2) from (city):
- (3) ☐ with two copies of the *Notice and Acknowledgment of Receipt* and a postage-paid return envelope addressed to me. (*Attach completed Notice and Acknowledgement of Receipt.*) (Code Civ. Proc., § 415.30.)
- (4) ☐ to an address outside California with return receipt requested. (Code Civ. Proc., § 415.40.)
- d. ☐ **by other means** (*specify means of service and authorizing code section*):

☐ Additional page describing service is attached.

6. The "Notice to the Person Served" (on the summons) was completed as follows:

- a. ☒ as an individual defendant.
- b. ☐ as the person sued under the fictitious name of (*specify*):
- c. ☐ as occupant.
- d. ☐ On behalf of (*specify*):  
under the following Code of Civil Procedure section:
- |   |   |
|---|---|
| <input type="checkbox"/> 416.10 (corporation)                     | <input type="checkbox"/> 415.95 (business organization, form unknown) |
| <input type="checkbox"/> 416.20 (defunct corporation)             | <input type="checkbox"/> 416.60 (minor)                               |
| <input type="checkbox"/> 416.30 (joint stock company/association) | <input type="checkbox"/> 416.70 (ward or conservatee)                 |
| <input type="checkbox"/> 416.40 (association or partnership)      | <input type="checkbox"/> 416.90 (authorized person)                   |
| <input type="checkbox"/> 416.50 (public entity)                   | <input type="checkbox"/> 415.46 (occupant)                            |
|   | <input type="checkbox"/> other:                                       |

7. **Person who served papers**

- a. Name: PAT CURLEY
- b. Address: P.O. BOX 8071, SAN JOSE, CA 95155
- c. Telephone number: 408-313-3152
- d. The fee for service was: \$ 160.00
- e. I am:
- (1) ☒ not a registered California process server.
- (2) ☐ exempt from registration under Business and Professions Code section 22350(b).
- (3) ☐ a registered California process server:
- ☐ owner ☐ employee ☒ independent contractor.
- (ii) Registration No.: 1250
- (iii) County: SANTA CLARA

8. ☒ I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

or

9. ☐ I am a California sheriff or marshal and I certify that the foregoing is true and correct.

Date: 5-13-2022

PAT CURLEY

(NAME OF PERSON WHO SERVED PAPERS/SHERIFF OR MARSHAL)

  
(SIGNATURE)



DECLARATIN OF DILIGENCE

VINCE NGUYEN aka VIN DUC NGUYEN

V

JULIE CLIFF

22CV397537

ACTIONS TAKEN FIRST TOATTEMPT PERSONAL SERVICE

VINCE NGUYEN aka VIN DUC NGUYEN

1255 BLEWETT AVE.

5-6-2022 11:15 AM FEMALE AT DOOR ID FROM PHOTO WIFE OF SUBJECT  
CLAIM SUBJECT NOT LIVING THERE, I DIDNOT BELIEVE HER.

5-10-2022 1:35PM NO ANSWER AT DOOR

5-11-2022 10:07 AM SUBSTITUTION OF SERVICE ON WIFE OF SUBJECT

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE  
OF CALIFORNIA THAT THE FORGOING IS TRUE AND CORRECT.

5-13-2022  
PAT CURLEY

